

Attorney or Party Name, Address, Phone & Fax Nos., State Bar No. & Email Benjamin Heston Bar Number: 297798 Nexus Bankruptcy 100 Bayview Circle #100 Newport Beach, CA 92660 Phone: (951) 290-2827 Email: ben@nexusbk.com		FOR COURT USE ONLY	
<input type="checkbox"/> Debtor(s) appearing without an attorney <input checked="" type="checkbox"/> Attorney for Debtor(s)			
United States Bankruptcy Court Central District of California - Riverside Division			
In re: Michael Valtierrez		CASE NO.: 6:23-bk-12285-RB	
		CHAPTER: Chapter 7	
		DECLARATION BY DEBTOR(S) AS TO WHETHER INCOME WAS RECEIVED FROM AN EMPLOYER WITHIN 60 DAYS OF THE PETITION DATE [11 U.S.C. § 521(a)(1)(B)(iv)]	
Debtor(s).		[No hearing required]	

Debtor(s) provides the following declaration(s) as to whether income was received from an employer within 60 days of the Debtor(s) filing this bankruptcy case (Petition Date), as required by 11 U.S.C. § 521(a)(1)(B)(iv):

Declaration of Debtor 1

1. ☒ I am Debtor 1 in this case, and I declare under penalty of perjury that the following information is true and correct:

During the 60-day period before the Petition Date (Check only ONE box below):

- ☒ **I was paid by an employer.** Attached are copies of all statements of earnings, pay stubs, or other proof of employment income I received from my employer during this 60-day period. *(If the Debtor's social security number or bank account is on a pay stub or other proof of income, the Debtor must cross out (redact) the number(s) before filing this declaration.)*
- ☐ **I was not paid by an employer** because I was either self-employed only, or not employed.

Date: 6/2/23

Michael Valtierrez
Printed name of Debtor 1

Signature of Debtor 1

Declaration of Debtor 2 (Joint Debtor) (if applicable)

2. ☐ I am Debtor 2 in this case, and I declare under penalty of perjury that the following information is true and correct:

During the 60-day period before the Petition Date (Check only ONE box below):

- ☐ **I was paid by an employer.** Attached are copies of all statements of earnings, pay stubs, or other proof of employment income I received from my employer during this 60-day period. *(If the Debtor's social security number or bank account is on a pay stub or other proof of income, the Debtor must cross out (redact) the number(s) before filing this declaration.)*
- ☐ **I was not paid by an employer** because I was either self-employed only, or not employed.

Date: _____

Printed name of Debtor 2

Signature of Debtor 2



Employee Pay Statement

Pay Period End Date: 05/15/2023

Employee ID: 477001

Employee Name: MICHAEL M VALTIERREZ

Bank ID/Acct No: 121042882/XXXXXX1802

Home Department: HS Health Svcs

Home Unit: 87901 HA Call Center

Pay Location: 11011 110 - PAY LCTN

Pay Information

Gross Pay	Reimbursements	Taxes & Deductions/ Salary Reduction	Net Pay	Issue Date	Effective Pay Period End Date	Pay Type	Run Type	Warrant/ Direct Deposit No
3,115.90	.00	1,486.91	1,628.99	05/30/2023	05/15/2023	Direct Deposit	Regular	00000-2032072149

Tax Information

Taxes	Taxable Wages	Taxable Wages YTD	Tax Class	Marital Status	Exemptions	Additional Exemptions	Multi Job	Dependents	Other Income	Deductions	Additional Withheld	Tax Date
W-4 FEDERAL TAX	2,830.25	17,951.80	FNL SNL NO EIC	SINGLE	0		N	.00	.00	.00	.00	02/16/2023
DE-4 STATE TAX	2,830.25	25,840.30		SINGLE	0	0					.00	02/16/2023
MEDI MEDICARE TAX	3,207.43	29,462.64	HIT ONLY									02/16/2023
W-5 EIC												02/16/2023

Retirement/Deferred Plan Information

Category	Current Base	Base YTD	Pensionable Cafeteria Plan Amount
CORET LACERA-EMPLR	2,518.37	24,479.70	.00
EHZNR HORIZONS PLAN	2,948.18	26,916.99	
PRRDN LACERA PLAN D	2,518.37	24,479.70	
RHZNR HORIZONS MATCH	2,288.37	22,883.70	

Cafeteria Benefits Information

Cafeteria Category				Cafeteria %		County Contribution		Salary Reduction		Contributed Benefits		Taxable Cash		Taxable Cash Limit	
RF011 OPTIONS CONTRIB				.00%		.00		.00		.00		.00		.00	
Benefit Cat	Benefit Type	Benefit Plan	Benefit Plan Description	Deduction %	Current Base	County Contributed	County Contributed YTD	Salary Reduction	Salary Reduction YTD	Benefit Applied	Benefit Applied YTD	Available Balance YTD			
EF136	EF136	C3	KAISER 721 FAM		.00	.00	9,100.10	.00	.00	.00	9,100.10	.00			
EF300	EF300	C3	DLTADNTL-O FAM		.00	.00	354.50	.00	.00	.00	354.50	.00			
EF410	EF410	250E+	AD&D 250K-EE+FM		.00	.00	29.75	.00	.00	.00	29.75	.00			
EL202	EL202	8XNE	LIFE 8XSAL		.00	.00	13.60	.00	.00	.00	13.60	.00			
EF045	EF045	EF045	LTD-H OP		.00	.00	15.00	.00	.00	.00	15.00	.00			
EF502	EF502	EF502	DEP CARE REIM		.00	.00	50.00	.00	.00	.00	50.00	.00			
EF012	EF012	OP2WF	OPTIONS ADM FEE		.00	.00	18.95	.00	.00	.00	18.95	.00			
Total Cafeteria Benefits						\$0.00	\$9,581.90	\$0.00	\$0.00	\$0.00	\$9,581.90	\$0.00			

Earnings Information - Current Pay Period 05/15/2023

Title/Sub-Title	Dept	Salary Rate	Pay Event	Hours/Units	Current Earnings**	Earnings YTD
8103 A COMNTY HLTH WKR	HS	28.6046	099 REGULAR EARN	75:00	2,145.35	20,589.09
8103 A COMNTY HLTH WKR	HS	2.0000	504 NITE SHIFT	90:00	180.00	1,096.00
8103 A COMNTY HLTH WKR	HS	50.0000	608 BILNGL BONS	1.00	50.00	500.00
8103 A COMNTY HLTH WKR	HS	26.3031	701 PAID OT	15:00	394.55	1,972.76
8103 A COMNTY HLTH WKR	HS	14.9334	731 PRM OT-SYSM	15:00	224.00	975.43
8103 A COMNTY HLTH WKR	HS	.0000	PFA36 FLEX EARN ADV	1.00	122.00	.00
8103 A COMNTY HLTH WKR	HS		PPO36 FLEX EARN	.00	.00	1,220.00
8103 A COMNTY HLTH WKR	HS		PY012 HOLIDAY	00:00	.00	627.57
8103 A COMNTY HLTH WKR	HS		PY021 VACATION	00:00	.00	1,489.69
8103 A COMNTY HLTH WKR	HS		PY028 AWOP UNAUTH	00:00	.00	.00
Total Current Earnings					\$3,115.90	\$28,470.54

**Calculated Current Earnings derived by multiplying the Salary Rate by the Hours/Units may vary slightly from the actual Current Earnings displayed on the pay statement. This is caused by rounding rules used to determine actual Current Earnings.

Taxes/Deductions Information

Ded Cat	Ded Type	Ded Plan	Deduction Plan Description	Deduction %	Current Deduction Base	Current Deductions Taken	Current Deductions Not Taken	Deductions YTD
FEDTX	FEDTX	FEDTX	FEDERAL TAX		2,830.25	300.17	.00	1,722.32
STATX	STATX	STATX	STATE TAX		2,830.25	120.68	.00	994.80
HITEE	HITEE	HITEE	H.I.T.	1.4500%	3,207.43	46.51	.00	427.21
PRRDN	ER062	ER062	LACERA PLAN D	6.6600%	2,518.37	167.72	.00	1,630.35
EHZNR	ED021	ED021	HORIZONS PLAN	4.0000%	2,948.18	117.93	.00	1,076.69
HLOAN	ED024	ED024	HZN PLAN LOAN		.00	157.42	.00	1,552.52
EL203	EL203	8XNE	LIFE 8XSAL		.00	.00	.00	119.20
EL301	EL301	20K	20K DEP LIFE		.00	.00	.00	14.15
GNSHF	GN016	S-12	SHERIFF'S GARN	18.0000%	2,480.82	446.55	.00	446.55
GNADM	GNADM	GNADM	GARN ADMIN FEE		.00	1.50	.00	1.50
EU101	EU101	EU101	LOC721LACEA		.00	36.03	.00	360.30
EU109	EU109	EU109	ALADS		.00	92.40	.00	924.00
Total Taxes/Deductions						\$1,486.91	\$0.00	\$9,269.59

Employer Benefits/Imputed Income Information

Benefit Cat	Benefit Type	Benefit Plan	Benefit Plan Description	Benefit %	Current Contribution Base	Current Contributions	Contributions YTD	Current Imputed Income	Imputed Income YTD
IL202	IL202	8XNE	LIFE IMP INC		.00	.00	.00	.00	76.80



Employee Pay Statement

Pay Period End Date: 05/15/2023

Employee ID: 477001

Employee Name: MICHAEL M VALTIERREZ

Bank ID/Acct No: 121042882/XXXXXX1802

Home Department: HS Health Svcs

Home Unit: 87901 HA Call Center

Pay Location: 11011 110 - PAY LCTN

Employer Benefits/Imputed Income Information

Benefit Cat	Benefit Type	Benefit Plan	Benefit Plan Description	Benefit %	Current Contribution Base	Current Contributions	Contributions YTD	Current Imputed Income	Imputed Income YTD
RHZNR	RD021	RD021	HORIZONS MATCH	4.0000%	2,288.37	91.53	915.30	.00	.00
RS505	RS505	OP5	DEP CARE SUB-OP		.00	.00	607.00	.00	.00
Total Employer Benefits/Imputed Income						\$91.53	\$1,522.30	\$0.00	\$76.80

Leave Benefits Information As Of: 05/15/2023

Leave Benefit	Leave Benefit Description	YTD Hours Used	Available Hours	Hours in Excess
LV011	SICK 100%	00:00	216:16	
LV012	HOLIDAY	16:00	34:15	
LV021	VACATION	50:15	228:11	
LV112	SICK PERSONAL	00:00	96:00	
LV162	SICK 65%	00:00	320:00	
LV164	SICK 50%	00:00	560:00	



Employee Pay Statement

Pay Period End Date: 04/30/2023

Employee ID: 477001

Employee Name: MICHAEL M VALTIERREZ

Bank ID/Acct No: 121042882/XXXXXX1802

Home Department: HS Health Svcs

Home Unit: 87901 HA Call Center

Pay Location: 11011 110 - PAY LCTN

Pay Information

Gross Pay	Reimbursements	Taxes & Deductions/ Salary Reduction	Net Pay	Issue Date	Effective Pay Period End Date	Pay Type	Run Type	Warrant/ Direct Deposit No
3,053.52	.00	1,049.07	2,004.45	05/15/2023	04/30/2023	Direct Deposit	Regular	00000-2031967093

Tax Information

Taxes	Taxable Wages	Taxable Wages YTD	Tax Class	Marital Status	Exemptions	Additional Exemptions	Multi Job	Dependents	Other Income	Deductions	Additional Withheld	Tax Date
W-4 FEDERAL TAX	2,785.11	15,121.55	FNL SNL NO EIC	SINGLE	0		N	.00	.00	.00	.00	02/16/2023
DE-4 STATE TAX	2,785.11	23,010.05		SINGLE	0	0					.00	02/16/2023
MEDI MEDICARE TAX	3,160.41	26,255.21	HIT ONLY									02/16/2023
W-5 EIC												02/16/2023

Retirement/Deferred Plan Information

Category	Current Base	Base YTD	Pensionable Cafeteria Plan Amount
CORET LACERA-EMPLR	2,518.37	21,961.33	.00
EHZNR HORIZONS PLAN	2,901.16	23,968.81	
PRRDN LACERA PLAN D	2,518.37	21,961.33	
RHZNR HORIZONS MATCH	2,288.37	20,595.33	

Cafeteria Benefits Information

Cafeteria Category				Cafeteria %		County Contribution		Salary Reduction		Contributed Benefits		Taxable Cash		Taxable Cash Limit	
RF011 OPTIONS CONTRIB				.00%		2,324.72		.00		1,916.38		244.00		244.00	
Benefit Cat	Benefit Type	Benefit Plan	Benefit Plan Description	Deduction %	Current Base	County Contributed	County Contributed YTD	Salary Reduction	Salary Reduction YTD	Benefit Applied	Benefit Applied YTD	Available Balance YTD			
EF136	EF136	C3	KAISER 721 FAM		.00	1,820.02	9,100.10	.00	.00	1,820.02	9,100.10	.00			
EF300	EF300	C3	DLTADNTL-O FAM		.00	70.90	354.50	.00	.00	70.90	354.50	.00			
EF410	EF410	250E+	AD&D 250K-EE+FM		.00	5.95	29.75	.00	.00	5.95	29.75	.00			
EL202	EL202	8XNE	LIFE 8XSAL	6.0350%	45.00	2.72	13.60	.00	.00	2.72	13.60	.00			
EF045	EF045	EF045	LTD-H OP		.00	3.00	15.00	.00	.00	3.00	15.00	.00			
EF502	EF502	EF502	DEP CARE REIM		.00	10.00	50.00	.00	.00	10.00	50.00	.00			
EF012	EF012	OP2WF	OPTIONS ADM FEE		.00	3.79	18.95	.00	.00	3.79	18.95	.00			
Total Cafeteria Benefits						\$1,916.38	\$9,581.90	\$0.00	\$0.00	\$1,916.38	\$9,581.90	\$0.00			

Earnings Information - Current Pay Period 04/30/2023

Title/Sub-Title	Dept	Salary Rate	Pay Event	Hours/Units	Current Earnings**	Earnings YTD
8103 A COMNTY HLTH WKR	HS	28.6046	099 REGULAR EARNS	80:00	2,288.37	18,443.74
8103 A COMNTY HLTH WKR	HS	2.0000	504 NITE SHIFT	90:00	180.00	916.00
8103 A COMNTY HLTH WKR	HS	50.0000	608 BILNGL BONS	1.00	50.00	450.00
8103 A COMNTY HLTH WKR	HS	26.3031	701 PAID OT	10:00	263.03	1,578.21
8103 A COMNTY HLTH WKR	HS	15.0116	731 PRM OT-SYSM	10:00	150.12	751.43
8103 A COMNTY HLTH WKR	HS	.0000	PFA36 FLEX EARN ADV	1.00	(122.00)	(122.00)
8103 A COMNTY HLTH WKR	HS	.0000	PPO36 FLEX EARN	1.00	244.00	1,220.00
8103 A COMNTY HLTH WKR	HS		PY012 HOLIDAY	00:00	.00	627.57
8103 A COMNTY HLTH WKR	HS		PY021 VACATION	00:00	.00	1,489.69
Total Current Earnings					\$3,053.52	\$25,354.64

**Calculated Current Earnings derived by multiplying the Salary Rate by the Hours/Units may vary slightly from the actual Current Earnings displayed on the pay statement. This is caused by rounding rules used to determine actual Current Earnings.

Taxes/Deductions Information

Ded Cat	Ded Type	Ded Plan	Deduction Plan Description	Deduction %	Current Deduction Base	Current Deductions Taken	Current Deductions Not Taken	Deductions YTD
FEDTX	FEDTX	FEDTX	FEDERAL TAX		2,785.11	290.24	.00	1,422.15
STATX	STATX	STATX	STATE TAX		2,785.11	116.71	.00	874.12
HITEE	HITEE	HITEE	H.I.T.	1.4500%	3,160.41	45.83	.00	380.70
PRRDN	ER062	ER062	LACERA PLAN D	6.6600%	2,518.37	167.72	.00	1,462.63
EHZNR	ED021	ED021	HORIZONS PLAN	4.0000%	2,901.16	116.05	.00	958.76
HLOAN	ED024	ED024	HZN PLAN LOAN		.00	157.42	.00	1,395.10
EL203	EL203	8XNE	LIFE 8XSAL	6.0350%	395.00	23.84	.00	119.20
EL301	EL301	20K	20K DEP LIFE		.00	2.83	.00	14.15
EU101	EU101	EU101	LOC721LACEA		.00	36.03	.00	324.27
EU109	EU109	EU109	ALADS		.00	92.40	.00	831.60
Total Taxes/Deductions						\$1,049.07	\$0.00	\$7,782.68

Employer Benefits/Imputed Income Information

Benefit Cat	Benefit Type	Benefit Plan	Benefit Plan Description	Benefit %	Current Contribution Base	Current Contributions	Contributions YTD	Current Imputed Income	Imputed Income YTD
IL202	IL202	8XNE	LIFE IMP INC		392.00	.00	.00	15.36	76.80



Employee Pay Statement

Pay Period End Date: 04/30/2023

Employee ID: 477001

Employee Name: MICHAEL M VALTIERREZ

Bank ID/Acct No: 121042882/XXXXXX1802

Home Department: HS Health Svcs

Home Unit: 87901 HA Call Center

Pay Location: 11011 110 - PAY LCTN

Employer Benefits/Imputed Income Information

Benefit Cat	Benefit Type	Benefit Plan	Benefit Plan Description	Benefit %	Current Contribution Base	Current Contributions	Contributions YTD	Current Imputed Income	Imputed Income YTD
RHZNR	RD021	RD021	HORIZONS MATCH	4.0000%	2,288.37	91.53	823.77	.00	.00
RS505	RS505	OP5	DEP CARE SUB-OP		.00	107.00	607.00	.00	.00
Total Employer Benefits/Imputed Income						\$198.53	\$1,430.77	\$15.36	\$76.80

Leave Benefits Information As Of: 04/30/2023

Leave Benefit	Leave Benefit Description	YTD Hours Used	Available Hours	Hours in Excess
LV011	SICK 100%	00:00	212:11	
LV012	HOLIDAY	16:00	34:15	
LV021	VACATION	50:15	221:39	
LV112	SICK PERSONAL	00:00	96:00	
LV162	SICK 65%	00:00	320:00	
LV164	SICK 50%	00:00	560:00	



Employee Pay Statement

Pay Period End Date: 04/15/2023

Employee ID: 477001

Employee Name: MICHAEL M VALTIERREZ

Bank ID/Acct No: 121042882/XXXXXX1802

Home Department: HS Health Svcs

Home Unit: 87901 HA Call Center

Pay Location: 11011 110 - PAY LCTN

Pay Information																										
		Taxes & Deductions/			Effective Pay						Warrant/															
Gross Pay		Reimbursements		Salary Reduction		Net Pay		Issue Date		Period End Date		Pay Type		Run Type		Direct Deposit No										
2,620.37		.00		841.04		1,779.33		04/28/2023		04/15/2023		Direct Deposit		Regular		00000-2031864054										
Tax Information																										
Taxes		Taxable Wages		Taxable Wages YTD		Tax Class		Marital Status		Exemptions		Additional Exemptions		Multi Job		Dependents		Other Income		Deductions		Additional Withheld		Tax Date		
W-4	FEDERAL TAX		2,355.82		12,336.44		FNL SNL NO EIC		SINGLE		0				N		.00		.00		.00		.00		02/16/2023	
DE-4	STATE TAX		2,355.82		20,224.94				SINGLE		0		0										.00		02/16/2023	
MEDI	MEDICARE TAX		2,711.90		23,094.80		HIT ONLY																		02/16/2023	
W-5	EIC																								02/16/2023	
Retirement/Deferred Plan Information																										
Category		Current Base			Base YTD			Pensionable Cafeteria Plan Amount																		
CORET	LACERA-EMPLR			2,498.37			19,442.96			.00																
EHZNR	HORIZONS PLAN			2,453.98			21,067.65																			
PRRDN	LACERA PLAN D			2,498.37			19,442.96																			
RHZNR	HORIZONS MATCH			2,288.37			18,306.96																			
Cafeteria Benefits Information																										
Cafeteria Category				Cafeteria %		County Contribution		Salary Reduction		Contributed Benefits		Taxable Cash		Taxable Cash Limit												
RF011 OPTIONS CONTRIB				.00%		.00		.00		.00		.00		.00												
Benefit Cat	Benefit Type	Benefit Plan	Benefit Plan Description		Deduction %	Current Base	County Contributed	County Contributed YTD	Salary Reduction	Salary Reduction YTD	Benefit Applied	Benefit Applied YTD	Available Balance YTD													
EF136	EF136	C3	KAISER 721 FAM			.00	.00	7,280.08	.00	.00	.00	7,280.08	.00													
EF300	EF300	C3	DLTADNTL-O FAM			.00	.00	283.60	.00	.00	.00	283.60	.00													
EF410	EF410	250E+	AD&D 250K-EE+FM			.00	.00	23.80	.00	.00	.00	23.80	.00													
EL202	EL202	8XNE	LIFE 8XSAL			.00	.00	10.88	.00	.00	.00	10.88	.00													
EF045	EF045	EF045	LTD-H OP			.00	.00	12.00	.00	.00	.00	12.00	.00													
EF502	EF502	EF502	DEP CARE REIM			.00	.00	40.00	.00	.00	.00	40.00	.00													
EF012	EF012	OP2WF	OPTIONS ADM FEE			.00	.00	15.16	.00	.00	.00	15.16	.00													
Total Cafeteria Benefits								\$0.00	\$7,665.52	\$0.00	\$0.00	\$0.00	\$7,665.52	\$0.00												
Earnings Information - Current Pay Period 04/15/2023																										
Title/Sub-Title			Dept		Salary Rate		Pay Event		Hours/Units		Current Earnings**		Earnings YTD													
8103 A COMNTY HLTH WKR			HS		25.4263		099 REGULAR EARN		80:00		2,034.11		16,155.37													
8103 A COMNTY HLTH WKR			HS		2.0000		504 NITE SHIFT		80:00		160.00		736.00													
8103 A COMNTY HLTH WKR			HS		50.0000		608 BILNGL BONS		1.00		50.00		400.00													
8103 A COMNTY HLTH WKR			HS				701 PAID OT		00:00		.00		1,315.18													
8103 A COMNTY HLTH WKR			HS				731 PRM OT-SYSM		00:00		.00		601.31													
8103 A COMNTY HLTH WKR			HS		.0000		PFA36 FLEX EARN ADV		1.00		122.00		.00													
8103 A COMNTY HLTH WKR			HS				PPO36 FLEX EARN		.00		.00		976.00													
8103 A COMNTY HLTH WKR			HS				PY012 HOLIDAY		00:00		.00		627.57													
8103 A COMNTY HLTH WKR			HS		25.4263		PY021 VACATION		10:00		254.26		1,489.69													
Total Current Earnings											\$2,620.37		\$22,301.12													
**Calculated Current Earnings derived by multiplying the Salary Rate by the Hours/Units may vary slightly from the actual Current Earnings displayed on the pay statement. This is caused by rounding rules used to determine actual Current Earnings.																										
Taxes/Deductions Information																										
Ded Cat	Ded Type	Ded Plan	Deduction Plan Description		Deduction %	Current Deduction Base	Current Deductions Taken	Current Deductions Not Taken	Deductions YTD																	
FEDTX	FEDTX	FEDTX	FEDERAL TAX			2,355.82	204.28	.00	1,131.91																	
STATX	STATX	STATX	STATE TAX			2,355.82	79.96	.00	757.41																	
HITEE	HITEE	HITEE	H.I.T.		1.4500%	2,711.90	39.32	.00	334.87																	
PRRDN	ER062	ER062	LACERA PLAN D		6.6600%	2,498.37	166.39	.00	1,294.91																	
EHZNR	ED021	ED021	HORIZONS PLAN		4.0000%	2,453.98	98.16	.00	842.71																	
HLOAN	ED024	ED024	HZN PLAN LOAN			.00	124.50	.00	1,237.68																	
EL203	EL203	8XNE	LIFE 8XSAL			.00	.00	.00	95.36																	
EL301	EL301	20K	20K DEP LIFE			.00	.00	.00	11.32																	
EU101	EU101	EU101	LOC721LACEA			.00	36.03	.00	288.24																	
EU109	EU109	EU109	ALADS			.00	92.40	.00	739.20																	
Total Taxes/Deductions								\$841.04	\$0.00	\$6,733.61																
Employer Benefits/Imputed Income Information																										
Benefit Cat	Benefit Type	Benefit Plan	Benefit Plan Description		Benefit %	Current Contribution Base	Current Contributions	Contributions YTD	Current Imputed Income	Imputed Income YTD																
IL202	IL202	8XNE	LIFE IMP INC			.00	.00	.00	.00	61.44																

**Calculated Current Earnings derived by multiplying the Salary Rate by the Hours/Units may vary slightly from the actual Current Earnings displayed on the pay statement. This is caused by rounding rules used to determine actual Current Earnings.



Employee Pay Statement

Pay Period End Date: 04/15/2023

Employee ID: 477001

Employee Name: MICHAEL M VALTIERREZ

Bank ID/Acct No: 121042882/XXXXXX1802

Home Department: HS Health Svcs

Home Unit: 87901 HA Call Center

Pay Location: 11011 110 - PAY LCTN

Employer Benefits/Imputed Income Information

Benefit Cat	Benefit Type	Benefit Plan	Benefit Plan Description	Benefit %	Current Contribution Base	Current Contributions	Contributions YTD	Current Imputed Income	Imputed Income YTD
RHZNR	RD021	RD021	HORIZONS MATCH	4.0000%	2,288.37	91.53	732.24	.00	.00
RS505	RS505	OP5	DEP CARE SUB-OP		.00	.00	500.00	.00	.00
Total Employer Benefits/Imputed Income						\$91.53	\$1,232.24	\$0.00	\$61.44

Leave Benefits Information As Of: 04/15/2023

Leave Benefit	Leave Benefit Description	YTD Hours Used	Available Hours	Hours in Excess
LV011	SICK 100%	00:00	207:50	
LV012	HOLIDAY	16:00	34:15	
LV021	VACATION	50:15	214:41	
LV112	SICK PERSONAL	00:00	96:00	
LV162	SICK 65%	00:00	320:00	
LV164	SICK 50%	00:00	560:00	



Employee Pay Statement

Pay Period End Date: 03/31/2023

Employee ID: 477001

Employee Name: MICHAEL M VALTIERREZ

Bank ID/Acct No: 121042882/XXXXXX1802

Home Department: HS Health Svcs

Home Unit: 87901 HA Call Center

Pay Location: 11011 110 - PAY LCTN

Pay Information														
		Taxes & Deductions/			Effective Pay				Warrant/					
Gross Pay		Reimbursements	Salary Reduction		Net Pay	Issue Date	Period End Date		Pay Type	Run Type	Direct Deposit No			
2,583.04		.00	862.43		1,720.61	04/14/2023	03/31/2023		Direct Deposit	Regular	00000-2031760976			
Tax Information														
Taxes		Taxable Wages	Taxable Wages YTD	Tax Class	Marital Status	Exemptions	Additional Exemptions	Multi Job	Dependents	Other Income	Deductions	Additional Withheld	Tax Date	
W-4	FEDERAL TAX	2,334.92	9,980.62	FNL SNL NO EIC	SINGLE	0		N	.00	.00	.00	.00	02/16/2023	
DE-4	STATE TAX	2,334.92	17,869.12		SINGLE	0	0					.00	02/16/2023	
MEDI	MEDICARE TAX	2,689.93	20,382.90	HIT ONLY									02/16/2023	
W-5	EIC												02/16/2023	
Retirement/Deferred Plan Information														
Category			Current Base		Base YTD		Pensionable Cafeteria Plan Amount							
CORET	LACERA-EMPLR		2,495.37		16,944.59		.00							
EHZNR	HORIZONS PLAN		2,432.21		18,613.67									
PRRDN	LACERA PLAN D		2,495.37		16,944.59									
RHZNR	HORIZONS MATCH		2,288.37		16,018.59									
Cafeteria Benefits Information														
Cafeteria Category			Cafeteria %		County Contribution		Salary Reduction		Contributed Benefits		Taxable Cash		Taxable Cash Limit	
RF011 OPTIONS CONTRIB			.00%		2,324.72		.00		1,916.38		244.00		244.00	
Benefit Cat	Benefit Type	Benefit Plan	Benefit Plan Description		Deduction %	Current Base	County Contributed	County Contributed YTD	Salary Reduction	Salary Reduction YTD	Benefit Applied	Benefit Applied YTD	Available Balance YTD	
EF136	EF136	C3	KAISER 721 FAM			.00	1,820.02	7,280.08	.00	.00	1,820.02	7,280.08	.00	
EF300	EF300	C3	DLTADNTL-O FAM			.00	70.90	283.60	.00	.00	70.90	283.60	.00	
EF410	EF410	250E+	AD&D 250K-EE+FM			.00	5.95	23.80	.00	.00	5.95	23.80	.00	
EL202	EL202	8XNE	LIFE 8XSAL		6.0350%	45.00	2.72	10.88	.00	.00	2.72	10.88	.00	
EF045	EF045	EF045	LTD-H OP			.00	3.00	12.00	.00	.00	3.00	12.00	.00	
EF502	EF502	EF502	DEP CARE REIM			.00	10.00	40.00	.00	.00	10.00	40.00	.00	
EF012	EF012	OP2WF	OPTIONS ADM FEE			.00	3.79	15.16	.00	.00	3.79	15.16	.00	
Total Cafeteria Benefits							\$1,916.38	\$7,665.52	\$0.00	\$0.00	\$1,916.38	\$7,665.52	\$0.00	
Earnings Information - Current Pay Period 03/31/2023														
Title/Sub-Title			Dept	Salary Rate	Pay Event	Hours/Units		Current Earnings**		Earnings YTD				
8103 A COMNTY HLTH WKR			HS	22.8837	099 REGULAR EARN	78:30		1,796.36		14,121.26				
8103 A COMNTY HLTH WKR			HS	2.0000	504 NITE SHIFT	78:30		157.00		576.00				
8103 A COMNTY HLTH WKR			HS	50.0000	608 BILNGL BONS	1.00		50.00		350.00				
8103 A COMNTY HLTH WKR			HS		701 PAID OT	00:00		.00		1,315.18				
8103 A COMNTY HLTH WKR			HS		731 PRM OT-SYSM	00:00		.00		601.31				
8103 A COMNTY HLTH WKR			HS	.0000	PFA36 FLEX EARN ADV	1.00		(122.00)		(122.00)				
8103 A COMNTY HLTH WKR			HS	.0000	PPO36 FLEX EARN	1.00		244.00		976.00				
8103 A COMNTY HLTH WKR			HS		PY012 HOLIDAY	00:00		.00		627.57				
8103 A COMNTY HLTH WKR			HS	22.8837	PY021 VACATION	20:00		457.68		1,235.43				
8103 A COMNTY HLTH WKR			HS		PY028 AWOP UNAUTH	00:00		.00		.00				
Total Current Earnings											\$2,583.04		\$19,680.75	
**Calculated Current Earnings derived by multiplying the Salary Rate by the Hours/Units may vary slightly from the actual Current Earnings displayed on the pay statement. This is caused by rounding rules used to determine actual Current Earnings.														
Taxes/Deductions Information														
Ded Cat	Ded Type	Ded Plan	Deduction Plan Description		Deduction %	Current Deduction Base	Current Deductions Taken	Current Deductions Not Taken	Deductions YTD					
FEDTX	FEDTX	FEDTX	FEDERAL TAX			2,334.92	201.77	.00	927.63					
STATX	STATX	STATX	STATE TAX			2,334.92	78.58	.00	677.45					
HITEE	HITEE	HITEE	H.I.T.		1.4500%	2,689.93	39.00	.00	295.55					
PRRDN	ER062	ER062	LACERA PLAN D		6.6600%	2,495.37	166.19	.00	1,128.52					
EHZNR	ED021	ED021	HORIZONS PLAN		4.0000%	2,432.21	97.29	.00	744.55					
HLOAN	ED024	ED024	HZN PLAN LOAN			.00	124.50	.00	1,113.18					
EL203	EL203	8XNE	LIFE 8XSAL		6.0350%	395.00	23.84	.00	95.36					
EL301	EL301	20K	20K DEP LIFE			.00	2.83	.00	11.32					
EU101	EU101	EU101	LOC721LACEA			.00	36.03	.00	252.21					
EU109	EU109	EU109	ALADS			.00	92.40	.00	646.80					
Total Taxes/Deductions								\$862.43	\$0.00	\$5,892.57				
Employer Benefits/Imputed Income Information														
Benefit Cat	Benefit Type	Benefit Plan	Benefit Plan Description		Benefit %	Current Contribution Base	Current Contributions	Contributions YTD	Current Imputed Income	Imputed Income YTD				
IL202	IL202	8XNE	LIFE IMP INC			392.00	.00	.00	15.36	61.44				



Employee Pay Statement

Pay Period End Date: 03/31/2023

Employee ID: 477001

Employee Name: MICHAEL M VALTIERREZ

Bank ID/Acct No: 121042882/XXXXXX1802

Home Department: HS Health Svcs

Home Unit: 87901 HA Call Center

Pay Location: 11011 110 - PAY LCTN

Employer Benefits/Imputed Income Information

Benefit Cat	Benefit Type	Benefit Plan	Benefit Plan Description	Benefit %	Current Contribution Base	Current Contributions	Contributions YTD	Current Imputed Income	Imputed Income YTD
RHZNR	RD021	RD021	HORIZONS MATCH	4.0000%	2,288.37	91.53	640.71	.00	.00
RS505	RS505	OP5	DEP CARE SUB-OP		.00	125.00	500.00	.00	.00
Total Employer Benefits/Imputed Income						\$216.53	\$1,140.71	\$15.36	\$61.44

Leave Benefits Information As Of: 03/31/2023

Leave Benefit	Leave Benefit Description	YTD Hours Used	Available Hours	Hours in Excess
LV011	SICK 100%	00:00	203:29	
LV012	HOLIDAY	16:00	34:15	
LV021	VACATION	40:15	217:43	
LV112	SICK PERSONAL	00:00	96:00	
LV162	SICK 65%	00:00	320:00	
LV164	SICK 50%	00:00	560:00	



Employee Pay Statement

Pay Period End Date: 03/15/2023

Employee ID: 477001

Employee Name: MICHAEL M VALTIERREZ

Bank ID/Acct No: 121042882/XXXXXX1802

Home Department: HS Health Svcs

Home Unit: 87901 HA Call Center

Pay Location: 11011 110 - PAY LCTN

Pay Information

Gross Pay	Reimbursements	Taxes & Deductions/ Salary Reduction	Net Pay	Issue Date	Effective Pay Period End Date	Pay Type	Run Type	Warrant/ Direct Deposit No
2,589.37	.00	872.48	1,716.89	03/30/2023	03/15/2023	Direct Deposit	Regular	00000-2031655486

Tax Information

Taxes	Taxable Wages	Taxable Wages YTD	Tax Class	Marital Status	Exemptions	Additional Exemptions	Multi Job	Dependents	Other Income	Deductions	Additional Withheld	Tax Date
W-4 FEDERAL TAX	2,328.04	7,645.70	FNL SNL NO EIC	SINGLE	0		N	.00	.00	.00	.00	02/16/2023
DE-4 STATE TAX	2,328.04	15,534.20		SINGLE	0	0					.00	02/16/2023
MEDI MEDICARE TAX	2,680.90	17,692.97	HIT ONLY									02/16/2023
W-5 EIC												02/16/2023

Retirement/Deferred Plan Information

Category	Current Base	Base YTD	Pensionable Cafeteria Plan Amount
CORET LACERA-EMPLR	2,467.37	14,449.22	.00
EHZNR HORIZONS PLAN	2,425.04	16,181.46	
PRRDN LACERA PLAN D	2,467.37	14,449.22	
RHZNR HORIZONS MATCH	2,288.37	13,730.22	

Cafeteria Benefits Information

Cafeteria Category			Cafeteria %		County Contribution		Salary Reduction		Contributed Benefits		Taxable Cash		Taxable Cash Limit
RF011 OPTIONS CONTRIB			.00%		.00		.00		.00		.00		.00
Benefit Cat	Benefit Type	Benefit Plan	Benefit Plan Description	Deduction %	Current Base	County Contributed	County Contributed YTD	Salary Reduction	Salary Reduction YTD	Benefit Applied	Benefit Applied YTD	Available Balance YTD	
EF136	EF136	C3	KAISER 721 FAM		.00	.00	5,460.06	.00	.00	.00	5,460.06	.00	
EF300	EF300	C3	DLTADNTL-O FAM		.00	.00	212.70	.00	.00	.00	212.70	.00	
EF410	EF410	250E+	AD&D 250K-EE+FM		.00	.00	17.85	.00	.00	.00	17.85	.00	
EL202	EL202	8XNE	LIFE 8XSAL		.00	.00	8.16	.00	.00	.00	8.16	.00	
EF045	EF045	EF045	LTD-H OP		.00	.00	9.00	.00	.00	.00	9.00	.00	
EF502	EF502	EF502	DEP CARE REIM		.00	.00	30.00	.00	.00	.00	30.00	.00	
EF012	EF012	OP2WF	OPTIONS ADM FEE		.00	.00	11.37	.00	.00	.00	11.37	.00	
Total Cafeteria Benefits						\$0.00	\$5,749.14	\$0.00	\$0.00	\$0.00	\$5,749.14	\$0.00	

Earnings Information - Current Pay Period 03/15/2023

Title/Sub-Title	Dept	Salary Rate	Pay Event	Hours/Units	Current Earnings**	Earnings YTD
8103 A COMNTY HLTH WKR	HS	28.6046	099 REGULAR EARN	64:30	1,844.99	12,324.90
8103 A COMNTY HLTH WKR	HS	2.0000	504 NITE SHIFT	64:30	129.00	419.00
8103 A COMNTY HLTH WKR	HS	50.0000	608 BILNGL BONS	1.00	50.00	300.00
8103 A COMNTY HLTH WKR	HS		701 PAID OT	00:00	.00	1,315.18
8103 A COMNTY HLTH WKR	HS		731 PRM OT-SYSM	00:00	.00	601.31
8103 A COMNTY HLTH WKR	HS	.0000	PFA36 FLEX EARN ADV	1.00	122.00	.00
8103 A COMNTY HLTH WKR	HS		PPO36 FLEX EARN	.00	.00	732.00
8103 A COMNTY HLTH WKR	HS		PY012 HOLIDAY	00:00	.00	627.57
8103 A COMNTY HLTH WKR	HS	28.6046	PY021 VACATION	15:30	443.38	777.75
Total Current Earnings					\$2,589.37	\$17,097.71

**Calculated Current Earnings derived by multiplying the Salary Rate by the Hours/Units may vary slightly from the actual Current Earnings displayed on the pay statement. This is caused by rounding rules used to determine actual Current Earnings.

Taxes/Deductions Information

Ded Cat	Ded Type	Ded Plan	Deduction Plan Description	Deduction %	Current Deduction Base	Current Deductions Taken	Current Deductions Not Taken	Deductions YTD
FEDTX	FEDTX	FEDTX	FEDERAL TAX		2,328.04	200.94	.00	725.86
STATX	STATX	STATX	STATE TAX		2,328.04	78.13	.00	598.87
HITEE	HITEE	HITEE	H.I.T.	1.4500%	2,680.90	38.87	.00	256.55
PRRDN	ER062	ER062	LACERA PLAN D	6.6600%	2,467.37	164.33	.00	962.33
EHZNR	ED021	ED021	HORIZONS PLAN	4.0000%	2,425.04	97.00	.00	647.26
HLOAN	ED024	ED024	HZN PLAN LOAN		.00	164.78	.00	988.68
EL203	EL203	8XNE	LIFE 8XSAL		.00	.00	.00	71.52
EL301	EL301	20K	20K DEP LIFE		.00	.00	.00	8.49
EU101	EU101	EU101	LOC721LACEA		.00	36.03	.00	216.18
EU109	EU109	EU109	ALADS		.00	92.40	.00	554.40
Total Taxes/Deductions						\$872.48	\$0.00	\$5,030.14

Employer Benefits/Imputed Income Information

Benefit Cat	Benefit Type	Benefit Plan	Benefit Plan Description	Benefit %	Current Contribution Base	Current Contributions	Contributions YTD	Current Imputed Income	Imputed Income YTD
IL202	IL202	8XNE	LIFE IMP INC		.00	.00	.00	.00	46.08



Employee Pay Statement

Pay Period End Date: 03/15/2023

Employee ID: 477001

Employee Name: MICHAEL M VALTIERREZ

Bank ID/Acct No: 121042882/XXXXXX1802

Home Department: HS Health Svcs

Home Unit: 87901 HA Call Center

Pay Location: 11011 110 - PAY LCTN

Employer Benefits/Imputed Income Information

Benefit Cat	Benefit Type	Benefit Plan	Benefit Plan Description	Benefit %	Current Contribution Base	Current Contributions	Contributions YTD	Current Imputed Income	Imputed Income YTD
RHZNR	RD021	RD021	HORIZONS MATCH	4.0000%	2,288.37	91.53	549.18	.00	.00
RS505	RS505	OP5	DEP CARE SUB-OP		.00	.00	375.00	.00	.00
Total Employer Benefits/Imputed Income						\$91.53	\$924.18	\$.00	\$46.08

Leave Benefits Information As Of: 03/15/2023

Leave Benefit	Leave Benefit Description	YTD Hours Used	Available Hours	Hours in Excess
LV011	SICK 100%	00:00	199:12	
LV012	HOLIDAY	16:00	26:15	
LV021	VACATION	20:15	230:51	
LV112	SICK PERSNL	00:00	96:00	
LV162	SICK 65%	00:00	320:00	
LV164	SICK 50%	00:00	560:00	